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I hereby certify that this correspondence is being deposited via facsimile to Commissioner in the United States Patent and Trademark Office, Art Unit 1761 whose telephone number is (703) 308-1594 and fax number is (703) 305-7718 on August 18, 2003.

Keith R. Haupt 8/18/03
 Keith R. Haupt, Reg. No. 37,638 Date

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Cheng, Stanley Kin-si
 Serial No.: 10/043,814
 Filed: January 10, 2002
 Group Art Unit: 1761
 Confirmation No.: 7857
 Examiner: Alexander, Reginald L.
 Title: Cookware With Undulating Cooking Surface
 Atty Docket: LWC-187

FAX RECEIVED**AUG 19 2003****TC 1700****OFFICIAL**

Cincinnati, Ohio 45202

August 18, 2003

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. ☒ Transmitted herewith is an Amendment in response to the Office Action of February 18, 2003.
2. ☐ Small Entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
 - ☐ Enclosed is a verified statement to establish Small Entity status
 - ☐ Other than a Small Entity
3. The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	LG. ENTITY
	Claims After Amendment:	Already Paid:	No. Extra:	Addit. Rate Fee:	Addit. Rate Fee:
TOTAL	11 MINUS	20 =	0 X	\$11 = \$	X \$22 = \$
INDEP	2 MINUS	3 =	0 X	\$40 = \$	X \$80 = \$
First Presentation of Multiple Dep. Claim:				+ \$130 = \$	+ \$260 = \$

Total Fee Due: \$ N/A

☒ **No additional fee for claims is required.**

4. ☐ Attached is a check in the sum of \$_____ for additional claims.

☐ Please charge my Deposit Account No. 23-3000 in the amount of \$_____.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply. Complete (a) or (b) as applicable.

(a) ☐ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Large Entity Fee	Small Entity Fee
<input type="checkbox"/>	One Month	\$110.00	\$55.00
<input type="checkbox"/>	Two Months	\$410.00	\$205.00
<input checked="" type="checkbox"/>	Three Months	\$930.00	\$465.00
<input type="checkbox"/>	Four Months	\$1,450.00	\$725.00

Extension fee due with this request \$ 930.00.

☒ Please charge my Deposit Account No. 23-3000 in the amount of \$ 930.00.

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

☐ An extension for _____ months has already been secured and the fee paid thereof of \$_____ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$_____.

OR

(b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

☒ **If any additional fee for claims or extension of time is required, charge Account No. 23-3000.**

Respectfully submitted,

WOOD, HERRON & EVANS, L.L.P.

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Cincinnati, Ohio 45202-2917
(513) 241-2324

By: 
Keith R. Haupt

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P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

This is responsive to the Office Action dated February 18, 2003.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.